SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:			PAGE 613 / 945								
(check or	ly one)										
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NAME OF COMMITTEE (In Full)												
People for Pearce												
Full Name (Last, First, Middle Initial) Kinneth Slaughter				Date of	f Re	ece	ipt					
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Full Name (Last, First, Middle Initial) Larry Smead	l	·	+	Date o	f Re	ece	ipt				_	
Mailing Address 164 Belden Street							•		/ [Y]		түтү) 0 8	7
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